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TT. A. S.		Application Number	10/828,316)						
TRANSMITTAL FORM		Filing Date	04/21/2004	04/21/2004							
		First Named Inventor	Gertzman	Gertzman et al							
. 01		Art Unit	1618								
0.01.00	eu 1	Examiner Name	Ebrahim								
(to be used for all correspondence after initial filing)		Attorney Docket Number	X-9468	X-9468							
Total Number of Pages in This Submission	······································										
ENCLOSURES (Check all that apply) After Allowance Communication to TC											
Fee Transmittal Form Fee Attached		Drawing(s) Licensing-related Papers		Appeal of Appe	Communication to Board als and Interferences						
Amendment/Repty After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence of Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C rks	Address	(Appeal Propriet Status L	Communication to TC Notice, Brief, Reply Brief) ary Information Letter Inclosure(s) (please Identify						
SIGNA	TURE (OF APPLICANT, ATTO	RNEY, C	R AGENT							
Firm Name Gipple & Hale .											
Signature		*			·						
Printed name John S. Hale											
Date December 5, 2005			Reg. No.	25,209							
CERTIFICATE OF TRANSMISSION/MAILING											
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Effective on 12/08/2004.

Name (Print/Type) John S Hale/Gpple & Hale

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Nu	mber 10/82	10/828,316				
FEE TRANSMITTAL			Filing Date	04/21	/2004					
For FY 2005			First Named In	ventor Gertz	man					
				Examiner Nam	e Ebrah	nim				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1618							
TOTAL AMOUNT OF PAYMENT (\$) 620.00			Attorney Docket No. X-9468							
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 07-1340 Deposit Account Name: GIPPLE & HALE										
For the above	e-identified dep	osit account, the	Director is he	reby authorized t	o: (check all tha	it apply)				
	e fee(s) indicate						cept for the filing fee			
Charge	Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATI										
1. BASIC FILING,		ND EXAMINAT	ION FEES							
1. BASIO I ILINO,	FILI	NG FEES	SEAF	RCH FEES	EXAMINAT		*			
Application Typ	e Fee	Small Entity (\$) Fee (\$)	Fee (Small Entity Fee (\$)	Fee (\$)	mall Entity Fee (\$)	Fees Paid (\$)			
Utility	300		500	250	200	100				
Design	200	100	100	50	130	65	· · · · · · · · · · · · · · · · · · ·			
Plant	200		300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)										
Fee Description Each claim over 20 (including Reissues)							25			
Each independent claim over 3 (including Reissues)							100			
Multiple dependent claims							180			
Total Claims				e Paid (\$)		Fee (\$)	ependent Claims Fee Paid (\$)			
HP = highest number		x paid for, if greater th	an 20.			1 66 141	1001 010101			
Indep. Claims			<u>e (\$) Fe</u>	e Paid (\$)						
-3 or HP = x =										
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
/ 50 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)										
Other (e.g., late filing surcharge): Extension Fee and Notice of Appeal Fee 620.00										
SUBMITTED BY										
					one 703-448-1770					
Name (Drinkffrens) L	- (/)/	rlo º Holo				Date De	ecember 5, 2005			

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